

## DMV Lane Technician Observation Report

DMV Technician: <u>Steve Aaron</u>		Position: <u>1</u> or 2	
Station: <u>Dok</u>	Date: <u>10-14-13</u>	Time:	
Vehicle Make: <u>Toyota</u>	Model: <u>Tundra</u>	Year: <u>2005</u>	
GVWR:	Fuel Type:	Registration Number: <u>DV 36</u>	
Auditor: <u>Girala</u>		Covert/ <u>Overt</u> (Circle One)	
		YES	NO
1. Did technician check vehicle paper work and verify VIN number?		<input checked="" type="checkbox"/>	
2. Was <b>Emissions</b> testing required?		<input checked="" type="checkbox"/>	
a) Was Emissions testing performed using OBD?		<input checked="" type="checkbox"/>	
b) Was Emissions testing performed using Analyzer Probe?			
c) Was Emissions testing performed using Paddle(s)?			
d) Was Emissions testing performed using Clip?			
3. Was <b>Catalytic Converter</b> inspection required?			
a) Was Catalytic Converter inspection performed?			
4. Was <b>Fuel Tank</b> pressure testing required?			
a) Was Fuel Tank pressure testing performed?			
5. Was <b>Fuel Cap</b> pressure testing required?			
a) Was Fuel Cap pressure testing performed?			
6. Is this test a <b>Re-check</b> from a prior failure?			
a) Which re-check test is being performed? 1 2 3 (circle one)			
b) If this is re-check #3, was repair paperwork verified for waiver?			
<b>Sussex County Only</b>			
7. Was <b>Curb Idle</b> testing required?			
a) Was Curb Idle testing performed?			
<b>Comment:</b> <u>Safety too</u>			

Original 08/06/2009/TMP

## DMV Lane Technician Observation Report

DMV Technician: <u>Chris Haines</u>		Position: <u>1</u> or 2	
Station: <u>DOV</u>	Date: <u>10-14-13</u>	Time:	
Vehicle Make: <u>Dodge</u>	Model: <u>Dakota</u>	Year: <u>1995</u>	
GVWR: <u>1/2</u>	Fuel Type: <u>G</u>	Registration Number: <u>272</u>	
Auditor: <u>Gresh</u>		Covert/Overt (Circle One)	
		YES	NO
1. Did technician check vehicle paper work and verify VIN number?		<input checked="" type="checkbox"/>	
2. Was <b>Emissions</b> testing required?		<input checked="" type="checkbox"/>	
a) Was Emissions testing performed using OBD?			
b) Was Emissions testing performed using Analyzer Probe?		<input checked="" type="checkbox"/>	
c) Was Emissions testing performed using Paddle(s)?		<input checked="" type="checkbox"/>	
d) Was Emissions testing performed using Clip?			
3. Was <b>Catalytic Converter</b> inspection required?		<input checked="" type="checkbox"/>	
a) Was Catalytic Converter inspection performed?		<input checked="" type="checkbox"/>	
4. Was <b>Fuel Tank</b> pressure testing required?			
a) Was Fuel Tank pressure testing performed?			
5. Was <b>Fuel Cap</b> pressure testing required?			
a) Was Fuel Cap pressure testing performed?			
6. Is this test a <b>Re-check</b> from a prior failure?			
a) Which re-check test is being performed? 1 2 3 (circle one)			
b) If this is re-check #3, was repair paperwork verified for waiver?			
<b>Sussex County Only</b>			
7. Was <b>Curb Idle</b> testing required?			
a) Was Curb Idle testing performed?			
<b>Comment:</b>			

Original 08/06/2009/TMP